

Representative Reichert
Member of Congress
8th Congressional District – Washington State
www.house.gov/reichert

Internship Application

Name: _____ Date: _____

Mailing Address: _____

City: _____

State/Zip: _____

Phone: _____

Parent/Guardian Name: _____

Mailing Address: _____

City: _____

State/Zip: _____

Phone: _____

I am applying for an internship during:

- ☐ Fall (Sept.-Dec.)
- ☐ Spring (Jan.-April)
- ☐ Summer (May-Aug.)

I am applying for an internship at:

- ☐ Washington, DC office
- ☐ Mercer Island office

College/University attending: _____

School Address: _____

Major: _____ Dept. Phone: _____

Will you receive credit for the internship?_____

How did you hear about our internship program?

Activities/Interests:

What would you like to learn from this internship? Why?

Please include with your application:

- Cover letter
- Resume
- At least two writing samples
- Two letters of recommendation

Please send the above information to:

Congressman Dave Reichert
2737 78th Ave SE, Suite 202
Mercer Island, WA 98040
(206) 275-3438